

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W	71534	04-52
O.I.P.E. CLASSIFIER			4-11-00
FORMALITY REVIEW	STCDO.	68991	5/26/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 -+ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	2-2-97
2	✓	✓	2-2-97
3	✓	✓	2-2-97
4	✓	✓	2-2-97
5	✓	✓	2-2-97
6	✓	✓	2-2-97
7	✓	✓	2-2-97
8	✓	✓	2-2-97
9	✓	✓	2-2-97
10	✓	✓	2-2-97
11	✓	✓	2-2-97
12	✓	✓	2-2-97
13	✓	✓	2-2-97
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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